



### You are the front line.

## Help protect against disease outbreaks in Chicago.

# REPORTABLE DISEASES IN ILLINOIS

Information reportable by law and allowed by HIPAA CFR 164 512(b)

Per the Control of Communicable Disease Code of Illinois, it is the responsibility of physicians, physician assistants, nurses, nurse aides or any other person having knowledge of any of the following diseases, confirmed or suspected, to report the case to the Chicago Department of Public Health (CDPH) within the timeframe indicated.

### **TO REPORT CASES:**

## CALL 312-743-9000 OR CALL 311 after business hours. ASK for the communicable disease physician.

### **IMMEDIATE** (within 3 hours by phone)

- Any unusual case or cluster of cases that may indicate a public health hazard (e.g. MERS-CoV, Ebola Virus Disease, Acute Flaccid Myelitis)
- Any suspected bioterrorism threat or event
- Anthrax

- · Botulism, foodborne
- Brucellosis (if suspected to be a part of a bioterrorist event or part of an outbreak)
- Diphtheria
- Influenza A, novel
- Plague
- Poliomyelitis

- Q-fever (if suspected to be a bioterrorist event or part of an outbreak)
- Severe Acute Respiratory Syndrome (SARS)
- Smallpox
- Tularemia (if suspected to be a bioterrorist event or part of an outbreak)

### 24 HOURS (by phone or e-reporting)

- Botulism: intestinal, wound, and other
- Brucellosis
- Chickenpox (varicella)
- Cholera
- Escherichia coli infections (O157:H7, other Shiga toxin-producing E. Coli)
- Foodborne or waterborne illness
- Haemophilus influenza, meningitis and other invasive disease
- Hantavirus pulmonary syndrome

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- Hepatitis A
- Influenza-associated intensive care unit hospitalization
- Measles
- Mumps
- · Neisseria meningitidis, invasive
- Pertussis (whooping cough)
- Q-fever

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- Smallpox vaccination, complications of
- Staphylococcus aureus, intermediate or high level resistance to vancomycin
- Streptococcal infections, Group A, invasive and sequelae
- Tularemia
- Typhoid Fever

### **7 DAYS** (by e-reporting)

#### **″ÁÁŒQÖÙÁ**

- Arboviral Infection (e.g., Dengue, Chikungunya, California encephalitis, Eastern equine encephalitis, Jamestown Canyon, Keystone, La Crosse, Snowshoe hare, St. Louis encephalitis, Trivitattus, West Nile, Western equine encephalitis, Yellow fever, and Zika viruses)
- Campylobacter
- Candida auris \*
- Carbapenem-resistant
   Enterobacteriaceae (CRE) \*
- Chancroid
- Chlamydia (including lymphogranuloma venereum)

- Cryptosporidiosis
- Cyclosporiasis
- · Drug-resistant organism, extensively
- Gonorrhea
- Hepatitis B, Hepatitis C, and Hepatitis D
- Histoplasmosis
- HIV infection
- Influenza deaths in persons less than 18 years of age
- Legionellosis
- Leptospirosis
- Listeriosis
- Malaria
- Psittacosis
- Reye's Syndrome

- · Salmonellosis (other than typhoid)
- Shigellosis
- Streptococcus pneumoniae, invasive disease (< 5 years)</li>
- Syphilis (including congenital syphilis)
- Tetanus
- Tickborne Disease (e.g., Anaplasmosis, Babesiosis, Ehrlichiosis, Lyme disease, Powassan virus, and Spotted fever rickettsioses)
- Toxic shock syndrome due to Staphylococcus aureus infection
- Trichinosis
- Tuberculosis
- Vibriosis (non-cholera)

Reportable to the Extensively Drug-Resistant Organism (XDRO) Registry by providers